

CLAIMS ONLY				Application Number <div style="font-size: 1.5em; font-weight: bold; text-align: center;">10/799748</div>		Filing Date <div style="height: 20px; border-bottom: 1px solid black;"></div>	
				Applicant(s) <div style="height: 20px; border-bottom: 1px solid black;"></div>			

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3		1				
4		1				
5		4				
6		2				
7		2				
8		2				
9		2				
10		1				
11		1				
12		2				
13		1				
14		1				
15		1				
16		1				
17		3				
18		3				
19		3				
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21		1				
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Total Indep	2					
Total Depend	50					
Total Claims	52					

* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend
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